

County: Pierce

Facility ID: 4120

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HERITAGE OF ELMWOOD NURSING HOME

232 EAST EAU GALLE AVENUE

ELMWOOD 54740 Phone: (715) 639-2911

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 59

Total Licensed Bed Capacity (12/31/03): 59

Number of Residents on 12/31/03: 48

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 50

City

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		12.5
Supp. Home Care-Personal Care	No					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	2.1	Under 65	4.2	More Than 4 Years		22.9
Day Services	No	Mental Illness (Org./Psy)	56.3	65 - 74	6.3			----
Respite Care	No	Mental Illness (Other)	6.3	75 - 84	33.3			85.4
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	47.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.1		----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	2.1	65 & Over	95.8	-----		
Transportation	No	Cerebrovascular	16.7		-----	RNs		7.1
Referral Service	No	Diabetes	6.3	Gender	%	LPNs		12.8
Other Services	No	Respiratory	8.3		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	27.1	Aides, & Orderlies		
Mentally Ill	No		----	Female	72.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	4	100.0	263	24	85.7	124	0	0.0	0	16	100.0	139	0	0.0	0	0	0.0	0	44 91.7
Intermediate	---	---	---	3	10.7	101	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3 6.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Dev. Disabled	---	---	---	1	3.6	189	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1 2.1
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Total	4	100.0		28	100.0		0	0.0		16	100.0		0	0.0		0	0.0		48 100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	14.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	19.1	Bathing	20.8	50.0	29.2	48
Other Nursing Homes	2.1	Dressing	20.8	50.0	29.2	48
Acute Care Hospitals	61.7	Transferring	39.6	35.4	25.0	48
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	33.3	39.6	27.1	48
Rehabilitation Hospitals	0.0	Eating	62.5	22.9	14.6	48
Other Locations	2.1	*****				
Total Number of Admissions	47	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.2		Receiving Respiratory Care	18.8
Private Home/No Home Health	27.1	Occ/Freq. Incontinent of Bladder	58.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	25.0	Occ/Freq. Incontinent of Bowel	33.3		Receiving Suctioning	0.0
Other Nursing Homes	4.2				Receiving Ostomy Care	0.0
Acute Care Hospitals	6.3	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.2		Receiving Mechanically Altered Diets	47.9
Rehabilitation Hospitals	0.0					
Other Locations	2.1	Skin Care			Other Resident Characteristics	
Deaths	35.4	With Pressure Sores	0.0		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	12.5		Medications	
(Including Deaths)	48				Receiving Psychoactive Drugs	66.7

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 50-99 Peer %	Ratio	Licensure: Skilled Peer %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	81.6	87.8	0.93	87.1	0.94	88.1	0.93	87.4	0.93
Current Residents from In-County	43.8	86.6	0.51	81.0	0.54	82.1	0.53	76.7	0.57
Admissions from In-County, Still Residing	10.6	34.3	0.31	19.8	0.54	20.1	0.53	19.6	0.54
Admissions/Average Daily Census	94.0	71.2	1.32	158.0	0.60	155.7	0.60	141.3	0.67
Discharges/Average Daily Census	96.0	73.5	1.31	157.4	0.61	155.1	0.62	142.5	0.67
Discharges To Private Residence/Average Daily Census	50.0	24.3	2.06	74.2	0.67	68.7	0.73	61.6	0.81
Residents Receiving Skilled Care	91.7	89.5	1.02	94.6	0.97	94.0	0.98	88.1	1.04
Residents Aged 65 and Older	95.8	84.0	1.14	94.7	1.01	92.0	1.04	87.8	1.09
Title 19 (Medicaid) Funded Residents	58.3	74.5	0.78	57.2	1.02	61.7	0.95	65.9	0.89
Private Pay Funded Residents	33.3	17.8	1.88	28.5	1.17	23.7	1.41	21.0	1.59
Developmentally Disabled Residents	2.1	2.8	0.75	1.3	1.64	1.1	1.88	6.5	0.32
Mentally Ill Residents	62.5	55.2	1.13	33.8	1.85	35.8	1.74	33.6	1.86
General Medical Service Residents	0.0	17.5	0.00	21.6	0.00	23.1	0.00	20.6	0.00
Impaired ADL (Mean)	45.4	49.3	0.92	48.5	0.94	49.5	0.92	49.4	0.92
Psychological Problems	66.7	68.8	0.97	57.1	1.17	58.2	1.15	57.4	1.16
Nursing Care Required (Mean)	9.9	7.4	1.34	6.7	1.47	6.9	1.43	7.3	1.35